FORM

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCI	ASHRE	SHIMMA	RY PAG

Reset Form

DISCLOSURE SUMMARY PAG		DR-2	DISCLOSURE DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization		(Rev. 12/20)	
	FAX		
HOUSER FOR SUPERULSOR IMPORTANT: Indicate by # type of committee you are reporting for	JAN 2 0 2003	Comm. #	
IMPORTANT: Indicate by # type of committee you are reporting for:	2 VOLUM DAC (2)State Party	1 1	
(1) Statewide/Legislative/Judge Standing for Retention Candidate (1) Statewide/Legislative/Judge Standing for Retention Candidate (1) County Candidate (1) C	idate (7)School Board or Other		
Political Subdivision Candidate (8) County PAC (9) City PAC (10))School Board or Other Political	1 1	
Subdivision PAC (11) Local Ballot Issue CANDIDATE COMMITTEES ONLY:		Audited	
	Political Party (if applicable)	File with:	
Candidate Name		1 1	cs and Campaign
	District (if Senate or House)	Disclosure 510 E. 12	e board th , Ste. 1A
Office Sought	·		es, Iowa 50319
	- Code section 688		281-3701
Late reports are subject to possible civil and criminal penalties. Pur the candidate, for a candidate's committee, and the chairperson, to	r any other type of committee, is	the	
individual responsible for fifing timely and accurate reports.			
Long Dyal	319-362-17	<u> 222 </u>	1-19-08
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	D.	ATE SIGNED
IAM FILINGA JAMUATY 19 2008	REPORT FOR (1) ELECTION /	(2)NON-ELECTION Y	EAR.
(report date)	Indicate by	y # 🚺	
CHECK IF AMENDMENT TO REPORT DATED		Local Committees,	enter Date of Election
CHECK IF AMENDMENT TO REPORT DATED			
Check if this is final (termination) report and attach Notice of Dis	solution Form DR-3.	County & Local Cor	mmittees, enter County in
(You must continue to file reports until a DR-3 is filed.)		which Election is he	
STATEME	NT OF CASH ON HAND		
CASH ON HAND at the beginning of the reporting period. (Total of	all funds held by the		- 1
committee. This amount MUST be the same as the cash of the last reporting period or must be zero if this is first	on nand at the end	\$	2.11
	report meany		
ADD TOTAL MONEY TAKEN IN THIS PERIOD	A) (tales can in-kind halaw)		
Schedule A: Cash Contributions total (Attach Schedule	A) (2:50 SEE III-KING DEIGW)		80.52
Schedule F: Loans Received total (Attach Schedule F)			
Schedule H: Total Sales of Campaign Property (Attach S			
(Schedule H applies to Candidates' Comm	ittees Only)	•	02 62
	SUB-TOTAL		82.63
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			80.52
Schedule B: Expenditures total (Attach Schedule B) (**	also see debts and loans below).		<u> </u>
Schedule F: Loan Repayments total (Attach Schedule F)		
CASH ON HAND at the end of this reporting period (if final report	palance must	•	2-11
be zero) (Attach DR-3) 110 1500 1500			
"UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	0000 511
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$ <u> </u>	9909.54
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES	NO
CANDIDATE COMMITTEES ONLY:	chedule H)	s	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach S			
STATE COMMITTEES: Submit a reconciled campaign account b	ank statement in January of each	, , , , , , , , , , , , , , , , , , , ,	

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	MONETARY
(Re — 7/03)	EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization) AMOUNT PURPOSE NAME AND ADDRESS TO WHOM **EXPENDED** (DESCRIBE TRANSACTION) CANDIDATE **EXPENDITURE** ID NUMBER DATE (Disbursement) WAS MADE (if applicable) EXPENDED AND PAC (MM/DD/YR) CHECK NUMBER Freedom Festival entry fee entry fee ID# Parade 40.00 CK# 6-5.07 Holiday Parade ÎD# 30,00 CK# nomination James Houser **ID#** papers nomination 60 papers 104 copy 6.00 CK# 12-07 postage for nomination papers Cedar Rapids Postal Service Cedar Rapids IA ID# 4.52 and return CK# 12-07 ID# CK# ID# CK# ID# CK# ID# CK# SUB-TOTAL 80.52 TOTAL (if last page of this schedule)

THIS BOX APPLIES		COMMITTEES	ONEV
THIS BAY ADDITES	TO CANDIDATES	COMMITTEES	Older 1
IMIS BOX VEL FIFE	10 0/1/2/2/		

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(1).)

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TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

		07		769-11	6-5-07		DATE RECEIVED (MM/DD/YR)	PART I - MONET	NOTE: This schedule	FOR INSTRUCTIO
	1	Sos Rockwalley Dr SW Cedar Ropids IA 52404 postage for nomination	James Houser Sos Pockualley Drsw Cedar Rapids IA 52404	Cedar Rapios IA 52404	Freedom Festival Parade James Houser 505 Rockvalley Orsw	James Houser 605 Rockwalley Or Sw Cedar Rapids IA SZYCH	involved. Include loans from candidate's personal runus. NAME AND ADDRESS OF LENDER R (Include Endorser's Name, If Applicable) (R)	PART - MONETARY LOANS RECEIVED THIS REPORTING PERIOD (Original source of loan, such as a bank, must be shown if a third party is	NOTE: This schedule reports money loaned to the committee which is deposited in the committee account. TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 9829,02	FOR INSTRUCTIONS, SEE BACK OF FORM COMMITTEE NAME (Must be same as on Statement of Organization)
	\$ 80,52						ELATIONSHIP O CANDIDATE If Applicable*)	ERIOD n if a third party is	ch is deposited in the ∞	ion)
	2	4.52	6,00	3000	40,00	1	OF LOAN			
TOTAL OU							DATE PAID (MM/DD/YR)	PART II - MONETARY (Loans forgiv	·	
From Schedule E – TOTAL LOANS FORGIVEN TOTAL OUTSTANDING LOANS END OF REPORT PERIOD	TOTAL CASH REPAYMENTS (PART II)						NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	PART II - MONETARY LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIOD (Loans forgiven must be reported on Schedule E – In-kind Contributions.)		Reset Form
DERIOD 5	**						RELATIONSHIP TO CANDIDATE* (If Applicable)	REPORTING PER - In-kind Contribution	AMENDING FORM	SCHEDULE F (Rev. 07/03)
4909.54							e. REPAID	1	FORM	LOANS RECEIVED & REPAID